

SERIAL NUMBER 09/229,226		FILING DATE 01/12/99	CLASS 600	GROUP ART UNIT 3737	ATTORNEY DOCKET NO. GTRC-1957	
APPLICANT JIN LIU, ATLANTA, GA; THOMAS N. LEWIS, ATLANTA, GA; MARK R. PRAUSNITZ, ATLANTA, GA. **CONTINUING DOMESTIC DATA***** VERIFIED PROVISIONAL APPLICATION NO. 60/071,240 01/12/98 PROVISIONAL APPLICATION NO. 60/085,304 05/13/98 **371 (NAT'L STAGE) DATA***** VERIFIED **FOREIGN APPLICATIONS***** VERIFIED IF REQUIRED, FOREIGN FILING LICENSE GRANTED 02/01/99						
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u> </u> Examiner's Initials Initials			STATE OR COUNTRY GA	SHEETS DRAWING 5	TOTAL CLAIMS 55	INDEPENDENT CLAIMS 2
ADDRESS PATREA L PABST ARNALL GOLDEN & GREGORY 2800 ONE ATLANTIC CENTER 1201 WEST PEACHTREE STREET ATLANTA GA 30309-3450						
TITLE ASSESSMENT AND CONTROL OF ACOUSTIC TISSUE EFFECTS						
FILING FEE RECEIVED \$1,455	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

SERIAL NUMBER 09/229,226		FILING DATE 01/12/99	CLASS 601	GROUP ART UNIT 3737	ATTORNEY DOCKET NO. GTRC-1957	
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CONTINUING DOMESTIC DATA*** VERIFIED PROVISIONAL APPLICATION NO. 60/071,240 01/12/98 <u>lu</u> PROVISIONAL APPLICATION NO. 60/085,304 05/13/98						
371 (NAT'L STAGE) DATA*** VERIFIED <u>lu (none)</u>						
FOREIGN APPLICATIONS*** VERIFIED <u>lu (none)</u>						
IF REQUIRED, FOREIGN FILING LICENSE GRANTED 02/01/99 ** SMALL ENTITY **						
Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Verified and Acknowledged <u>lu</u> Examiner's Initials _____ Initials _____		<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY GA	SHEETS DRAWING 5	TOTAL CLAIMS 55
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TITLE ASSESSMENT AND CONTROL OF ACOUSTIC TISSUE EFFECTS						
FILING FEE RECEIVED \$825		FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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Bib Data Sheet

CONFIRMATION NO. 7360

SERIAL NUMBER 09/229,226	FILING DATE 01/12/1999 RULE	CLASS 601	GROUP ART UNIT 3737	ATTORNEY DOCKET NO. GTRC-1957
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APPLICANTS

JIN LIU, ATLANTA, GA;

 THOMAS N. LEWIS, ATLANTA, GA;
 MARK R. PRAUSNITZ, ATLANTA, GA;

** CONTINUING DATA *****

 This appln claims benefit of 60/071,240 01/12/1998
 and claims benefit of 60/085,304 05/13/1998

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 02/01/1999

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GA	SHEETS DRAWING 5	TOTAL CLAIMS 55	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

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 30361

TITLE

ASSESSMENT AND CONTROL OF ACOUSTIC TISSUE EFFECTS

FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of



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** CONTINUING DATA ***** This appln claims benefit of 60/071,240 01/12/1998 and claims benefit of 60/085,304 05/13/1998				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 02/01/1999				
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ADDRESS 23579				
TITLE ASSESSMENT AND CONTROL OF ACOUSTIC TISSUE EFFECTS				
FILING FEE RECEIVED 1394	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	